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PTO/SB/05 (11-00)

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UTILITY **PATENT APPLICATION** TRANSMITTAL

Attorney Docket No. 220002063600 First Inventor Asim DASGUPTA, et al. METHOD TO IDENTIFY IRES ELEMENTS Express Mail Label No. EL 795546645 US

Only for new nonprovisional applications under 37 CFR 1.53(b))

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

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Ruth Saskowski	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231
1. Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. Applicant claims small entity status. See 37 CFR 1.27. 3. Specification [Total Pages 23] Descriptive title of the Invention Cross Reference to Related Applications Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description Claim(s) Abstract of the Disclosure 4. Drawing(s) (35 USC 113) [Total Sheets 11] Oath or Declaration [Total Pages]	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on:
a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1 63(d)(2) and 1 33(b) 6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box and supply the requiredr 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) Prior application information For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application,	13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other uisite information below and in a preliminary amendment, or in an Application Data Sheet of prior application No: Group / Art Unit
disclosure of the accompanying continuation or divisional application and is hereby incorporat inadvertently omitted from the submitted application parts. -19. CORRESPON Customer Number or Bar Code Label	IDENCE ADDRESS or Correspondence address below
25225 PATENT TRADEMARK OFFICE (Insert Customer No. or Attach bar code label here)	
Name Kate H. Murashige 3811 Valley Centre Drive	
Address Suite 500	
City San Diego Sta	
Country USA Telephon	
Name (Print/Type) Kate H. Murashige	Registration No. (Attorney/Agent) 29,959
Signature Date March 1, 2002	

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FEE TRANSMITTAL **FOR FY 2002**

Complete if Known Application Number To be assigned Filing Date Herewith First Named Inventor Asim DASGUPTA, et al. Examiner Name To be assigned

To be assigned

Date

March 1, 2002

Patent fees are subject to annual revision.

(\$) 370.00 Attorney Docket No 220002063600

Group Art Unit

TOTAL AMOUNT OF PAYMENT

METHOD OF PAYMENT **FEE CALCULATION (continued)** The Commissioner is hereby authorized to charge indicated 1. 🔀 3. ADDITIONAL FEES fees and credit any overpayments to: Deposit Large Entity Small Entity 03-1952 Account Fee Fee Fee Fee Number Fee Paid Code (\$) Code (\$) Fee Description Deposit Account Morrison & Foerster LLP Name 105 130 205 65 Surcharge - late filing fee or oath 図 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Surcharge - late provisional filing 127 50 227 25 fee or cover sheet X Applicant claims small entity status. See 37 CFR 1.27 139 130 139 130 Non-English specification 2. For filing a request for ex parte Payment Enclosed: 147 2,520 147 2,520 reexamination ☐ Check ☐ Credit Card ☐ Money Order ☐ Other Requesting publication of SIR prior 112 920* 112 920* to Examiner action **FEE CALCULATION** Requesting publication of SIR after 113 1,840* 113 1,8401 Examiner action BASIC FILING FEE 115 110 215 55 Extension for reply within first month Extension for reply within second 116 400 216 200 Large Entity Small Entity Fee (\$) Extension for reply within third Fee Description 117 920 Fee (\$) 217 460 ree Code Code month Extension for reply within fourth 118 1 440 218 720 month 101 740 201 370 Utility filing fee 370 128 1,960 228 980 Extension for reply within fifth month 106 330 206 165 Design filing fee 119 320 219 160 Notice of Appeal 107 510 207 255 Plant filing fee 120 320 220 160 Filing a bnef in support of an appeal 108 740 208 370 Reissue filing fee 121 280 221 140 Request for oral hearing Petition to institute a public use 114 160 214 80 Provisional filing fee 138 1.510 138 1,510 proceeding 140 110 240 55 Petition to revive - unavoidable SUBTOTAL (1) (\$) 370.00 1,280 241 640 Petition to revive - unintentional **EXTRA CLAIM FEES** 142 1,280 242 640 Utility issue fee (or reissue) Extra Fee from 143 460 243 230 Design issue fee **Total Claims** -20 =11 \$ 144 620 244 310 Plant issue fee Independent -3 = 1122 130 122 130 Petitions of the Commissioner Multiple Dependent Petitions related to provisional 123 50 123 50 applications Submission of Information 126 180 126 180 Disclosure Stmt Large Entity Smalt Recording each patent assignment per properties (times number of Fee Description Fee (\$) 581 40 581 40 (\$) Code Code properties) Filing a submission after final 103 18 203 9 Claims in excess of 20 146 740 246 370 rejection (37 CFR § 1.129(a)) 102 202 For each additional invention to be 42 Independent claims in excess of 3 149 740 249 370 examined (37 CFR § 1.129(b)) 104 Request for Continued Examination 280 140 Multiple dependent claims, if not paid 179 740 279 370 (RCE) **Reissue independent claims over original patent 109 84 209 42 Request for expedited examination 169 900 169 900 of a design application **Reissue claims in excess of 20 and over original patent 110 18 210 9 Other fee (specify) SUBTOTAL (2) (\$) ** or number previously paid, if greater; For reissues, see above. *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) SUBMITTED BY Complete (if applicable) Registration No. Name (Print/Type) Kate H. Murashige 29,959 Telephone (858) 720-5112

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